

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 6292.211

First Named Inventor MEYER, et al.

COMPLETE IF KNOWN

Application Number

Filing Date January 20, 2004

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR PACKING

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 01/20/2004 as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|--|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | Yes | No |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ Customer Number: OR ☐ Correspondence address below

Name

Joseph W. Berenato, III

Address

Liniak, Berenato & White, LLC, 6550 Rock Spring Dr., Suite 240

City

Bethesda

State

MD

ZIP

20817

Country

USA

Telephone

301-896-0600

Fax

301-896-0607

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Kenneth M.

Family Name

or Surname

Welborn

Inventor's
Signature

Date

4/5/04

Residence: City

Charlottesville

State

VA

Country

USA

Citizenship

USA

Mailing Address
139 Bennington Rd.

City

Charlottesville

State

VA

ZIP

22901

Country

USA

NAME OF SECOND INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Gregg A.

Family Name

or Surname

Martin

Inventor's
Signature

Date

4-1-04

Residence: City

Charlottesville

State

VA

Country

USA

Citizenship

USA

Mailing Address
940 Canvas Back Drive

City

Charlottesville

State

VA

ZIP

22903

Country


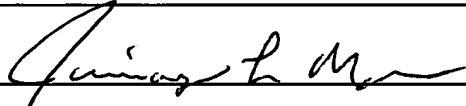
USA



Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

| | |
|---------------------------|---|
| DECLARATION | ADDITIONAL INVENTOR(S) Supplemental Sheet |
| Page <u>1</u> of <u>1</u> | |

| | | | |
|---|-------------|---|--------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Steven N. | | Tomlin | |
| Inventor's Signature  | | Date <u>4-1-04</u> | |
| Crimora Residence: City | VA State | USA Country | USA Citizenship |
| 314 Rock Mountain Lane Mailing Address | | | |
| Mailing Address | | | |
| Crimora City | VA State | 24431 Zip | USA Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Jimmy L. | | Meyer | |
| Inventor's Signature  | | Date <u>4-1-04</u> | |
| Waynesboro Residence: City | VA State | USA Country | USA Citizenship |
| 1825 West Main Street Mailing Address | | | |
| Mailing Address | | | |
| Waynesboro City | VA State | 22980 Zip | USA Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Colin R. | | Hart | |
| Inventor's Signature | | Date | |
| Ankeny Residence: City | IA State | USA Country | USA Citizenship |
| 3404 SW 35th Street Mailing Address | | | |
| Mailing Address | | | |
| Ankeny City | IA State | 50021 Zip | USA Country |

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

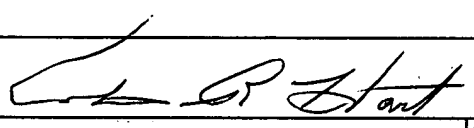
If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION**ADDITIONAL INVENTOR(S)**

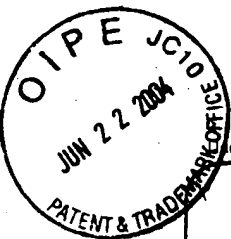
Supplemental Sheet

Page 1 of 1

| | | | |
|--|-------------|---|--------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Steven N. | | Tomlin | |
| Inventor's Signature | | Date | |
| Crimora Residence: City | VA State | USA Country | USA Citizenship |
| 314 Rock Mountain Lane Mailing Address | | | |
| Mailing Address | | | |
| Crimora City | VA State | 24431 Zip | USA Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Jimmy L. | | Meyer | |
| Inventor's Signature | | Date | |
| Waynesboro Residence: City | VA State | USA Country | USA Citizenship |
| 1825 West Main Street Mailing Address | | | |
| Mailing Address | | | |
| Waynesboro City | VA State | 22980 Zip | USA Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Colin R. | | Hart | |
| Inventor's Signature  | | Date 2-6-04 | |
| Ankeny Residence: City | IA State | USA Country | USA Citizenship |
| 3404 SW 35th Street Mailing Address | | | |
| Mailing Address | | | |
| Ankeny City | IA State | 50021 Zip | USA Country |

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number

Filing Date

First Named Inventor

Title

Group Art Unit

Examiner Name

Attorney Docket Number

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

| | | | |
|-------------------------|--------|----------------------|--------|
| Thomas P. Liniak | 33,415 | George Ayvazov | 37,483 |
| Joseph W. Berenato, III | 30,546 | Jeffery L. Auerbach | 32,680 |
| John M. White | 32,634 | Karen L. Orzechowski | 31,621 |
| Matthew W. Stavish | 36,286 | William C. Schrot | 48,447 |
| Matthew F. Johnston | 41,096 | Wesley W. Muller | 50,988 |

Place Customer
Number Bar Code
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

OR

Place Customer
Number Bar Code
Label here

☒ Firm or
Individual Name

Joseph W. Berenato, III

Address

Liniak, Berenato & White, LLC

Address

6550 Rock Spring Drive, Suite 240

City

Bethesda

State

Maryland

Zip

20817

Country

US

Telephone

301-896-0600

Fax

301-896-0607

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Russell D. Martin

Signature

Russell D. Martin

Date

4-8-04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.